

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	A		
O.I.P.E. CLASSIFIER			
/FORMALITY REVIEW	NP	585	10-16-01
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 - ..... Restricted O ..... Objected

Claim	Date
Final	15-30-03
Original	
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5	✓
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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30-1900  
10-16-01